Procter & Gamble - I.P. Division

OCT 2 5 2004

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FROM: Brent M. Peebles, Esq.

Fax No. 513-627-8118

Phone No. 513-627-6773

Listed below are the item(s) being submitted with this Certificate of Transmission:*

1) Fee Transmitttal (In dup.)

2) RCE Transmittal (in dup.)

3) Amendment (7 pgs.) 4) Attachment (4 pgs.)

Inventor(s): Pieroni et al. S.N.:

10/027,647

December 21, 2004

Filed: Case:

AA511

Number of Pages Including this Page: 16 Comments:

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| FEE TRANSMITTAL for FY 2005 Patent for see subject to surreal revision. | 7 | Complete if Known |
|---|----------------------|-------------------|
| for FY 2005 | Application Number | 10/027,647 |
| Patent fees are subject to annual revision. | Confirmation Number | 1490 |
| | Filing Date | December 21, 2001 |
| | First Named Inventor | L. Pieroni et al. |
| | Examiner Name | M. Splaich |
| 1 | Art Unit | 1744 |
| TOTAL AMOUNT OF PAYMENT (\$)790.00 | Attorney Docket No. | AA511 |

| METHOD OF PAYMENT | FEE CALCULATION (continued) | | |
|---|--|--|--|
| The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any | 3. ADDITIONAL PEES | | |
| additional foc(s) during the pendency of this application to: | Cade (5) Fee Description Foe Paid | | |
| | 1051 130 Surcharge-late filing fee or outh | | |
| Deposit Account Number: 16-2480 | 1052 50 Surcharge-late provisional filing fee or cover sheet | | |
| Deposit Account Name: The Procter & Gamble Company | 1053 130 Non-English specification [] | | |
| | 1812 2,520 For filing a request for ex parte reexamination | | |
| . · · · · · · · · · · · · · · · · · · · | 1804 920* Requesting publication of SIR prior to Examiner's action [] | | |
| FEE CALCULATION | 1805 1,840* Requesting publication of SIR after | | |
| FEE CALCULATION | Examiner's action | | |
| 1. BASIC FILING FEE - Large Entity | 1251 110 Extension for reply within 1 st mouth | | |
| | 1252 430 Extension for reply within 2 nd month | | |
| Code (5) Fee Description Fee Paid | l . | | |
| 1001 790 Utility filing fee [] | 1253 980 Extension for reply within 3 rd month [] 1254 1,530 Extension for reply within 4 th month [] | | |
| 1002 350 Design filing fee [] | 1255 2,080 Extension for reply within 5th month | | |
| 1004 790 Reissue filing fee [] | | | |
| 1005 160 Provisional filing for [] | 1401 340 Notice of Appeal [] 1402 340 Filing a brief in support of an appeal [] | | |
| 144 144 House name and | 1403 300 Request for oral hearing | | |
| SUBTOTAL (1) (5)(0) | 1451 1,510 Petition to institute a public use proceeding | | |
| | 1452 110 Petition to revive - unavoidable | | |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE - Large BOTTY | 1453 1,370 Petition to revive - unintentional | | |
| | 1501 1,370 Utility issue fee (or reissue) | | |
| Extra Fee from Fee | 1502 490 Design issue fee | | |
| Claims Below Paid | 1460 130 Petitions to the Commissioner | | |
| Total Claims [] - 20** [] x [] = [] | 1807 50 Processing foe under 37 C.F.R. 1.17(q) | | |
| Independent Claims [] - 3** = [] x [] =[] | 1806 180 Submission of Information Disclosure Statement | | |
| Multiple Dependent | 1809 790 Filing a submission after final rejection | | |
| ** or number previously paid, if greater; For Reissues, see below | (37 CFR § 1.129(a)) | | |
| | 1810 790 For each additional invention to be | | |
| Code (S) Fee Description | examined (37 CFR §1.129(b) | | |
| 1202 18 Claims in excess of 20 | 1801 790 Request for Continued Examination (RCE) [790] | | |
| 1201 88 Independent claims in excess of 3 | 1802 900 Request for expedited examination [] | | |
| 1203 300 Multiple dependent claim, if not paid | 1454 1370 Acceptance of unintentionally delayed claim for. | | |
| 1204 88 **Reissue independent claims over original patent | priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c) | | |
| 1205 18 **Reissue claims in excess of 20 & over original patent | 1 | | |
| | Other fee (specify) | | |
| | Other for (specify) | | |
| SUBTOTAL (2) (\$)[0] | * Reduced by Basic Filing Fee Paid SUBTOTAL(3) (5) [790] | | |

| SUBMITTED BY | | Comple | Complete (if applicable) | | |
|----------------------------|---|--------------------------------------|--------------------------|-----------|------------------|
| Name (Print/Type) | Brent M. Peebles | Registration No. (Attorney/Agent) | 38,576 | Telephone | (513) 627-6773 |
| Signature | BX | | | Date | October 25, 2004 |
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| FEE TRANSMITTAL | Complete if Known | | |
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| | Examiner Name | M. Spinich | |
| | Art Unit | 1744 | |
| TOTAL AMOUNT OF PAYMENT (\$)790.00 | Attorney Docket No. | AA511 | |

| METHOD OF PAYMENT | FEE CALCULATION (continued) | | | |
|--|---|-------|--|--|
| The Director is bereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge say | 3. ADDITIONAL FEES | | | |
| additional fee(s) during the pendency of this application to: | Code (5) Fee Description Fee Paid | | | |
| | 1051 130 Surcharge-late filing fee or oath | О | | |
| Deposit Account Number: 16-2480 | 1052 50 Surcharge-late provisional filing fee or cover sheet | ō | | |
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| | 1812 2,520 For filing a request for exparte reexamination | O | | |
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| FEE CALCULATION | 1805 1,840* Requesting publication of SIR after Examiner's action | п | | |
| 1. BASIC FILING FEE - Large Entity | | B | | |
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| Code (\$) Fee Description Fee Paid | | a . | | |
| 1001 790 Utility filing fee [] | | 0 | | |
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| 1005 160 Provisional filing fee [] | | ň | | |
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| Extra Fee flow Fee | 1502 490 Design issue fee | 0 | | |
| Claims Below Paid | | 0 | | |
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| Independent Claims [] - 3**= [] x [] =[] | | 0 | | |
| Multiple Dependent =[| 1809 790 Filing a submission after final rejection | | | |
| or number previously paid, if greater; For Reissues, see below | | 0 | | |
| Code (\$) Fee Description | 1810 790 For each additional invention to be | _ | | |
| 1202 18 Claims in excess of 20 | | 0 | | |
| 1202 16 Claims in excess of 20 1201 88 Independent claims in excess of 3 | | [790] | | |
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| 1203 300 Multiple dependent claim, if not paid | | | | |
| 1204 88 **Reissue independent claims over original patent | priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c) | 0 | | |
| 1205 18 **Reissue claims in excess of 20 & over original patent | privary animal 35 0.3.5.2 119, 120, 121, 07 303 (8) 07 (6) | | | |
| | Other fee (specify) | П | | |
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| SUBTOTAL (2) (5)(0) | * Reduced by Basic Filing Fee Paid SUBTOTAL(3) (5) [7] | 901 | | |

Complete (if spolicable) bone (513) 627-6773 Brent M. Peebles 38,576 October 25, 2004

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